



DJ
#4R6031
C.F.R.
PATENTS

Docket No. 52078.P6

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants: Brian M. Boling, et al
Serial No.: 09/684,831
Filed: October 10, 2000
For: EMERGENCY PHONE WITH ALTERNATE
NUMBER CALLING CAPABILITY

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APR 11 2001
Technology Center 2600

Application Processing Division
ATTN: Customer Correction Branch
Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

LETTER REQUESTING CORRECTED FILING RECEIPT

Applicant's attorneys have received the Filing Receipt for Patent Application above referenced, a copy of which is attached. The receipt should be corrected as follows:

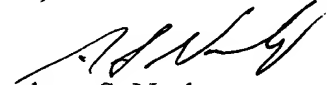
Under "Applicant(s)" delete "Brain" and insert therefor --Brian--.

It is respectfully requested that a corrected Filing Receipt be issued by the Patent Office.

Respectfully submitted,

LUEDEKA, NEELY & GRAHAM, P.C.

By:


Andrew S. Neely
Registration No. 28,979

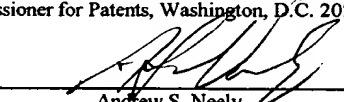
P. O. Box 1871
Knoxville, TN 37901
(865) 546-4305

FA52078.P6.FR.COR.REQ.1211.wpd

*** CERTIFICATE OF MAILING ***

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: , Assistant Commissioner for Patents, Washington, D.C. 20231.

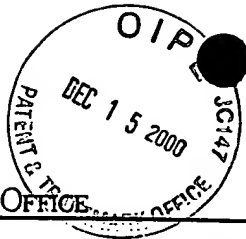
on 12/11/00
Date


Andrew S. Neely

52078.P6
C-0271.5
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Page 1 of 4
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LUEDEKA, NEELY, & GRAHAM, P.C.

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WASHINGTON, D.C. 20231
www.uspto.gov

APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/684,831	10/10/2000	2681	355	52078.P6	9	20	3

000408
LUEDEKA NEELY AND GRAHAM
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KNOXVILLE, TN 37901-1871

FILING RECEIPT



Date Mailed: 11/28/2000

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the PTO processes the reply to the Notice, the PTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s) Brian
Brian M. Boling, Knoxville, TN ;
Michael C. Bernstein, Knoxville, TN ;
Nicholas A. Natale, Knoxville, TN ;

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Continuing Data as Claimed by Applicant

THIS APPLICATION IS A CIP OF 09/538,364 03/29/2000
WHICH IS A CIP OF 09/495,080 01/31/2000
WHICH IS A CON OF 09/044,497 03/19/1998 PAT 6,044,257

Foreign Applications

If Required, Foreign Filing License Granted 11/28/2000

** SMALL ENTITY **

Title

Emergency phone with alternate number calling capability

Preliminary Class

455

NO NEW DATES DOCKETED
ATTY: MPC



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Bib Data Sheet

CONFIRMATION NO. 2156

SERIAL NUMBER 09/684,831	FILING DATE 10/10/2000 RULE	CLASS 455	GROUP ART UNIT 2681	ATTORNEY DOCKET NO. 52078.P6
APPLICANTS Brian M. Boling, Knoxville, TN; Michael C. Bernstein, Knoxville, TN; Nicholas A. Natale, Knoxville, TN;				
** CONTINUING DATA ***** THIS APPLICATION IS A CIP OF 09/538,364 03/29/2000 WHICH IS A CIP OF 09/495,080 01/31/2000 ABN WHICH IS A CON OF 09/044,497 03/19/1998 PAT 6,044,257				
** FOREIGN APPLICATIONS ***** <i>none JPS</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 11/28/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met <i>Allowances</i> Verified and Acknowledged <i>James D. Smith</i> 2-04-04 Examiner's Signature Initials		STATE OR COUNTRY TN	SHEETS DRAWING 9	TOTAL CLAIMS 20
		INDEPENDENT CLAIMS 3		
ADDRESS 000408				
TITLE Emergency phone with alternate number calling capability				
FILING FEE RECEIVED 355	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	